V3475
UPTON
CHARLES MICHA

DEPARTMENT OF VETERANS AFFAIRS

D OF D 10-2-42

# AWARDS NAVY

WAR SERVICE RECORDS

D.D.

| SURNAME (IN BLOCK LETTERS) | CHRISTIAN NAMES | REG. No. | RANK ON DISCHARGE | C.A.S.F. UNIT |
|---|---|---|---|---|
| UPTON | Charles Michael Augustine | Coder | V-3475 | FILE No. [redacted] |

WAR SERVICE BADGE (CLASS) No. Nil DATE DESPATCHED:

ADDRESS:

| CAMPAIGN MEDALS | REGISTRATION NUMBER AND DATE DESPATCHED |
|---|---|
| 1939-45 Star | |
| Atlantic Star | |
| C.V.S.M. & Clasp | 3096 16-1-50 |
| War Medal | |
| | |
| | |

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 8/6

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Aug. 42 "SPIKENARD"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS,

PERS[redacted]

ENTI[redacted]D TO Mr. W.F. Upton - Father

ADDRESS: 4 Dessane Avenue,
Quebec, P.Q.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. W.H. Upton

ADDRESS: 4 Dessane Avenue,
Quebec, Que.

MEMORIAL BAR

(1)

DATE DESP.....

REGN. NO 462

(2)

(3)

23-4-42

Personnel Records
Division.

1. Noted in Records ✓
2. Index Card ✓
3. Non-Sup. Card
4. Statistical Card ✓
5. Ronco Strip ✓
6. Pension Card
7.
8. 16/3/40 L.K
DATE

PC 8833

N. V. 5
5M—10-39 (2365)
N.S. 815-11-5

NATIONAL DEFENCE
MAR 12 1945
H.Q. 113-2-8
CANADA

CANADA

# ATTESTATION FORM

## FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Upton OFFICIAL NO. 3475

CHRISTIAN NAMES Charles Michaels Augustine MARRIED, SINGLE or WIDOWER Single

| PERMANENT ADDRESS | RELIGION |
|---|---|
| 4 Dessane Ave., Quebec , P.Q. | R.C. |

| DATE OF BIRTH | PLACE OF BIRTH | NAME AND ADDRESS OF NEXT OF KIN |
|---|---|---|
| Feb. 9th. 1922 | Town Quebec<br>County<br>Province Quebec | Father:<br>Mr. W.F.Upton<br>same address |

## PERSONAL DESCRIPTION ON ENROLMENT

| HEIGHT | CHEST MEASUREMENT | HAIR | EYES | COM-PLEXION | WOUNDS, SCARS, MARKS |
|---|---|---|---|---|---|
| Feet 5<br>Inches 11¾ | Inflated 36<br>Deflated 31<br>Mean 33 | Fair | Blue | Fair | Nil |

| DATE OF ENROLMENT | RATING ENROLLING FOR | TRADE OR CALLING AND IN WHOSE EMPLOY |
|---|---|---|
| March 8th. 1940 | Ord. Sea. | Telephone operator<br>Naval Service Control Office<br>Port. of Quebec. |

## (B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

(1) That I am a British Subject domiciled in Canada.

(2) That I am desirous of being enrolled as a member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.

(3) That * (a) I have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.

* (b) I served in ..... for the period shown, and attach my record of service, in corroboration of this statement.

* Cross out Clause not applicable.

| SERVED IN | RANK | FROM | TO |
|---|---|---|---|
| | Not applicable | | |

(c) I have never been rejected from any of His Majesty's Forces on account of unfitness.

(4) That the particulars contained above are correct and true according to the best of my knowledge and belief.

(5) On being enrolled as a member of the Quebec Division of t
Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—

(a) To serve from the date thereof for ~~three consecutive years~~ Duration of Hostilities, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Volunteer Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.

(b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed, according to where my services are required.

(c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Divisional Commanding Officer or to Training Headquarters prior to my discharge or when required so to do by any authorized person, or to pay compensation for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit (which is and remains the property of the Crown) except when on naval duty.

Dated this 8th day of March 1940

Signature of applicant Charles Michael Augustus Upton

## (C) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this 8th. day of March 1940

Signature of Commanding Officer.

F.A.Price, Lt-Cdr., R.C.N.V.R.

## (D) OATH OF ALLEGIANCE

I, Charles Michael Augustine Upton do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty, His heirs and successors according to law.

Signature of Applicant Charles Augustus Michael Upton

Witness F. C. Pollack
I.C.Pollack

Date March 8th. 1940 Rank Actg Lt. R.C.N.V.R.

The Oath of Allegiance may be administered by a Commissioned Officer of the Naval Service.

## (E) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

Charles Michael Augustine Upton having been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be recorded in the Record Book of the Quebec Division of the R.C.N.V.R.

Commanding Officer.

F.A.Price, Lt-Cdr., R.C.N.V.R.

NOTE.—This form when completed and when the particulars on it have been noted in the Divisional Commanding Officer's Record Book, is to be forwarded to Headquarters, Ottawa, for custody.

The Certificate of medical examination, B-207, and certificates of previous service are to be sent to Headquarters, Ottawa, with this form.

Certificates of previous service will be returned after they have been examined at Headquarters, Ottawa.

V3475 OFFICIAL NUMBER | FILE NUMBER 113-U-8 | OFFICIAL NUMBER V3475

NAME UPTON (Surname) Charles Michael Augustine (Given Names) DATE OF BIRTH 9 February, 1922

PLACE OF BIRTH Quebec City, Quebec. OCCUPATION Telephone Operator

RELIGION Roman Catholic EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 4 Dessane Avenue Town Quebec Province, etc Quebec.

**ENGAGEMENTS**

| Date (in figures) Day | Month | Year | Period |
|---|---|---|---|
| 8 | 3 | 40 | H. Q. |

**DESCRIPTION**

| Height | Hair | Eyes | Complexion | Marks or Scars |
|---|---|---|---|---|
| 5'11 3/4" | Fair | Blue | Fair | |

**PREVIOUS SERVICE**

| Served in | Rank or Rating | Dates From | To |
|---|---|---|---|
| | | | |

NEXT OF KIN RELATIONSHIP (in pencil) father NAME (in pencil) Mr. W. T. Upton

ADDRESS (in pencil): Street and No. 4 Dessane Avenue Town Quebec Province, etc. Quebec.

**MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY**

| Date (in figures) Day | Month | Year | Particulars |
|---|---|---|---|
| | | | |

**EXAMINATIONS, CERTIFICATES, ETC.**

| Date (in figures) Day | Month | Year | Particulars | Date (in figures) Day | Month | Year | Particulars |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

**BADGES, G.C. OR G.S.**

| Date (in figures) Day | Month | Year | 1st, 2nd or 3rd G.C. or G.S. | Granted Deprived Restored |
|---|---|---|---|---|
| | | | | |

**BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES**

| Ship or Establishment | Wt. No. | Date (in figures) Day | Month | Year | Brief Particulars of Offence | Punishment |
|---|---|---|---|---|---|---|
| | | | | | | |

**SECOND CLASS FOR CONDUCT**

| From | To |
|---|---|
| | |

| Date (in figures) Day | Month | Year | Days Forfeited Prison | Det'n | Cells | C. Power | W. Trial | In diff. Char. |
|---|---|---|---|---|---|---|---|---|
| | | | | | | | | |

O. H. F. Rec.

FILM NO. W.S. 221-2
DATE
DATE

W.S.G. APPLICATION 10331 RECEIVED 5/6/45

H.Q. 35—30M—5-41 (337)
N.S. 815—7-35

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

V3475 OFFICIAL NUMBER | NAME UPTON (Surname) Charles Michael Augustine (Given Names) | OFFICIAL NUMBER V3475

| Ship or Establishment | Rating | From Day | From Month | From Year | Remarks | Character | Efficiency | Date Day | Date Month | Date Year | Non-Sub. Rating | Qualified Day | Qualified Month | Qualified Year | Re-Qualified Day | Re-Qualified Month | Re-Qualified Year |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Div. Str. Quebec | Ord. Smn. | 8 | 3 | 40 | | V.G. | Sat | 10 | 2 | 42 | | | | | | | |
| Duty Div. Hdqs. | " " | 20 | 3 | 40 | | " | " | 31 | 12 | 49 | | | | | | | |
| N.C.S.O. Quebec | " " | 1 | 4 | 40 | | " | " | 31 | 12 | 41 | | | | | | | |
| Stadacona | " " | 6 | 1 | 41 | | | | | | | | | | | | | |
| " | Ord. Coder | 21 | 6 | 41 | | | | | | | | | | | | | |
| Spikenard | " " | 27 | 6 | 41 | | | | | | | | | | | | | |
| DISCHARGED | " " | 10 | 2 | 42 | Spikenard Casualty. | | | | | | | | | | | | |

GENERAL REMARKS

Memorial Cross to his Mother:
Mrs. W.F. Upton,
4 Dessane Avenue,
Quebec, Quebec.

| DATE OF BIRTH DY. | MO. | YR. | PLACE OF BIRTH | CIVIL OCCU. MAIN | SUB | RELIGION | PERM. RESIDENCE PROV. | CITY/TOWN | PREV. ENL. SERV. | DIV. | RANK OR RATE ON ENLISTMENT A | SR |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 09 | 2 | 22 | 12 | 570 | 0 | 10 | 24 | 09 | 0 | 12 | 0 | 0895 |

| ENLIST. DATE DY. | MO. | YR. | ACT. SERV. DATE DY. | MO. | YR. | STR. CAT. | SHIP OR ESTAB. | RANK OR RATE A | SR. | RANK. |
|---|---|---|---|---|---|---|---|---|---|---|
| 08 | 03 | 40 | 20 | 03 | 40 | | 9830 | 0 | 09 | 9.5 |

| SENIORITY DY. | MO. | YR. | STR. CAT. | NON-SUB A | B | M ST. | | CODED | CHECKED |
|---|---|---|---|---|---|---|---|---|---|
| 21 | 06 | 41 | 09 | 00 | 00 | 20 | 10-02-42 | | |

V3475 UPTON Charles M. A. 113-U-8

SERVICE

PRESENT RANK/RATING: Ordinary Coder.

DATE TAKEN ON ACTIVE SERVICE: 20-3-40

17

SERVICE

| SHIP OR ESTABLISHMENT | From | To |
|---|---|---|
| Duty Div. Hdqtrs. | 20-3-40 | 31-3-40 |
| N.C.S.O. Quebec. | 1-4-40 | 5-1-41 |
| Stadacona | 6-1-41 | 26-6-41 |
| Spikenard. | 27-6-41 | 9-2-42 |

WILL: No.

NAME & ADDRESS OF NEXT-OF-KIN: FATHER: Mr.W.F.Upton,
4 Dessane Avenue,
Quebec, Quebec.

Initialled by: G.L. Date: 19-2-42 Section: #3

Naval Personnel
Records.

(TO BE COMPLETED IN INK)

113-21-8

5C

# OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

PLEASE LEAVE BLANK

12

## Section A—GENERAL INFORMATION

1. (a) Print name in full CHARLES A.M. UPTON (b) Reg'l. No. V 3475
2. (a) Arm of service NAVY (b) Unit R.C.N.V.R. QUEBEC (c) Rank ORD. SEA
3. (a) Date of birth FEB 4th/22 (b) Have you any dependents? NIL (c) Place of residence at time of enlistment QUEBEC CITY P.Q.
4. (a) Place of enlistment QUEBEC CITY P.Q. (b) Date of enlistment APRIL 1940

## Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 17 YRS 6 MOS (b) Were you attending school or college up to the time of enlistment? NO
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 2 YRS HIGH 1 COMMERCIAL
7. If you attended a university, give name of university and standing or degree secured
8. (a) Did you ever enter upon a trade apprenticeship? (b) If so, for what occupation? (c) Did you finish it? (d) If you did not finish it, how long did you serve at it?
9. (a) What languages do you speak fluently? ENGLISH (b) What languages do you read well? ENGLISH

## Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) WORKING (b) At time of enlistment of what trade union or professional society were you a member? NIL

## Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school?
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked (b) State how long you had worked at this trade or occupation
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment
15. Give details of last employer, if any: Name Address
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
17. (a) If your last employment was in a business of your own, state nature and address of business (b) Date of discontinuing it

## Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer CIVIL SERVICE Address QUEBEC CITY
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) NAVAL CONTROL SERVICE
20. (a) Your specific occupation CLERK (b) Number of years' experience at this occupation with any employer
21. (a) Did your employer promise definitely to give you employment on discharge? (b) Did your employer refuse to promise you employment on discharge? (c) Do you wish to return to your former employment?

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice (b) Where was it located?
23. (a) Number of years engaged in this business (b) Have you made, or will you make plans to return to the same or a similar business on discharge?

## Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? (b) Do you feel competent to operate a farm? (c) If so, in what kind of farming?
25. (a) Were you born on a farm? (b) How many years' actual farming experience have you had? (c) In what provinces did you have experience?

## Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? NO
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.)
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form R.C.M.P.

O.H.F. RECEIVED

DATE [illegible] 194 SIGNATURE [illegible]

COPY TO
VWD
ES
9-5-41

VERIFICATION

CAMPAIGN STARS, DEFENCE MEDAL, WAR M
NAVAL GENERAL SERVICE ME

NAME IN FULL Upton Charles Michael Augustine RANK/RATING ..... Coo

| SHIP | SERVICE | | | AREA | | |
|---|---|---|---|---|---|---|
| | FROM | TO | DAYS | | FROM | TO |
| Hadocona | 20-3-40 | 24-6-41 | 487 | | | |
| Spikenard | 27-6-41 | 10-2-42 | 227 | atlantic | | |
| Discharged "Dead" to date 16-2-42 | | | | | | |

VERIFIED BY ..... VERIFIED BY .....

VERIFICATION FORM

DEFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.

AL GENERAL SERVICE MEDAL (1915).

Augustine

/RATING .....Coder.....OFF.NO. ....U.3473.....ADDRESS .....

| | QUALIFYING PERIODS IN DAYS | | | | | | | STARS MEDALS | ✓ 1 2 | ELIGIBLE FOR AWARDS OF |
|---|---|---|---|---|---|---|---|---|---|---|
| | FROM | TO | 1939-45 | ATLANTIC | DEFENCE | CLASP C.V.S.M. | 1915 MEDAL | | | |
| | | | | | | | | 1939-45 | 1 | Star |
| | | | | | | | | | | |
| ntu | | | | | | | | ATLANTIC | 1 | Star |
| | | | | | | | | | | |
| | | | | | | | | FRANCE G. | | |
| | | | | | | | | | | |
| | | | | | | | | AFRICA | | |
| | | | | | | | | | | |
| | | | | | | | | PACIFIC | | |
| | | | | | | | | | | |
| | | | | | | | | BURMA | | |
| | | | | | | | | | | |
| | | | | | | | | ITALY | | |
| | | | | | | | | | | |
| | | | | | | | | DEFENCE | | |
| | | | | | | | | | | |
| | | | | | | | | C.V.S.M. | 2 | @ le.lasp |
| | | | | | | | | | | |
| | | | | | | | | " CLASP | | |
| | | | | | | | | | | |
| | | | | | | | | WAR 1945 | 1 | Medal |
| | | | | | | | | | | |
| | | | | | | | | WAR 1915 | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

VERIFIED BY L.L.Lockhart...

D BY .....

.....DIR.OF PERSONNEL RECORDS.

3 Dep. T V-3475

# TRUE COPY

OF THE

# CERTIFICATE of the Service of

Charles Michael Augustine UPTON

IN THE ROYAL CANADIAN ~~NAVY~~ NAVAL VOLUNTEER RESERVE

The corner of this Certificate is to be cut off if the man is discharged with a "Bad" character or with disgrace, or if specially directed by the Department of National Defence (Naval Service). If the corner is cut off, the fact is to be noted in the Ledger.

Official Number V 3475

Date of birth 9 February 1922

Where born { Province Quebec / Town or county Quebec.

Trade brought up to Student

Religious denomination Roman Catholic

Date passed swimming test

Man's signature on discharge to pension

Nearest known Relative or Friend
(To be noted in pencil)

Name: W. J Upton

Relationship: Father

Address: 4 Dessane Ave
Quebec PQ

**All Engagements, including N.C.S., to be noted in these Columns**

| Date of actually volunteering | Commencement of time | Period volunteered for | Date of actually volunteering | Commencement of time | Period volunteered for |
|---|---|---|---|---|---|
| 1. 1 Mch 40 | 8 Mch 40 | Duration of Hostilities | 5. | | |
| 2. | | | 6. | | |
| 3. | | | 7. | | |
| 4. | | | 8. | | |

**Medals, Clasps, Etc.**

| Date received or forfeited | Nature of decoration | Date received or forfeited | Nature of decoration |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

| Description of Person | Stature | | Chest, In. | Colour of | | | Marks, Wounds and Scars |
|---|---|---|---|---|---|---|---|
| | Feet | In. | | Hair | Eyes | Complexion | |
| On entry as a boy | | | | | | | |
| On advancement to man's rating or on entry under 28 years | 5 | 11 3/4 | — | Fair | Blue | Fair | Nil |
| On re-entry for C.S. or for Non-C.S. after attaining 28 years | | | | | | | |
| Further description if necessary | | | | | | | |

C.N.S. 1243
20M—4-41 (241)
N.S. 815-9-1243

CAUTION.—This is an Official document. Any alteration made to it without proper authority will render the offender liable to severe penalties.

Name Chas. Michael Augustine UPTON

| Ship's Name (Tenders to be inserted in brackets) | List and No. | Rating | From | To | Cause of Discharge |
|---|---|---|---|---|---|
| Stadacona (N.C.S.O. Que) | | Ord. Smn. | 20 Mch '40 | 23 Dec '40 | |
| Stadacona | | —"— | 24 Dec '40 | 20 June '41 | |
| —"— | | Ord. Coder | 21 June '41 | 26 June '41 | |
| Avalon (Spikenard) | | —"— | 27 June '41 | 27 June '41 | |
| —"— | | Coder | 28 June '41 | 10 Feb 42 | D.D. |

| Date | Wounds received in Action and Hurt Certificate; also any Meritorious Service, Special Recommendations, Prize or other Grants | Captain's Signature |
|---|---|---|

## Service

| Ship's Name (Tenders to be inserted in brackets) | List and No. | Rating | From | To | Cause of Discharge |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Examinations passed and Notations or Qualifications other than those entered on History Sheets

| Date | Particulars | Captain's Signature | Date | Particulars | Captain's Signature |
|---|---|---|---|---|---|
| 15 Jan '41 | Qual A/G 1 day | | | | |
| 21 June '41 | Qual & rated Ord Coder | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

**Name** Chas. Michael Augustine UPTON **Conduct**

| Second Class for Conduct (inclusive dates) | |
|---|---|
| From | To |
| | |

**Efficiency in Rating**—ARTICLE 607—K.R.

**3. Definition of Terms**—As a guide to Commanding Officers when making their award the following definitions are given of the terms to be used:—

Superior..................................A man who performs his duties with more than average efficiency.
to be written **Supr.**
Satisfactory..............................A man who performs his duties with average efficiency.
" Sat.
Moderate..................................A man who performs his duties in an efficient manner but with less than average efficiency.
" Mod.
Inferior..................................A man who performs his duties in an inefficient manner.
" Inferior.

NOTE.—In these definitions "duties" means the general duties of the substantive rating held, and "average efficiency" means the average efficiency of all men in the Service holding the same substantive rating.

The substantive rating held by the man at the time is to be noted in brackets after each assessment thus: Supr. (A.B.).

| Character | Efficiency in Rating, noting substantive rating in brackets | Whether R.M.G. or not | Date | Captain's Signature |
|---|---|---|---|---|
| VG | Sat (OSmn.) | | 31 Dec '40 | |
| VG | Sat (Coder) | | 31 Dec '41 | |
| VG | — (Coder) | | 10 Feb '42 | |

| Good Conduct Badges | | |
|---|---|---|
| Date | 1st, 2nd, 3rd | Granted, Deprived, Restored |
| | | |

| Time forfeited | | | |
|---|---|---|---|
| Date | P., D., C., C.P., W.T. | Number of days: Awarded | Number of days: Served |
| | | | |

Can. B. 207
20M—8-38
N.S. 815-2-207

CANADA

# CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE NAVAL SERVICE OF CANADA

**(R.C.N. OR RESERVE FORCES)**

NOTE—This Certificate is to be completed by the Examining Medical Officer and forwarded to the Naval Secretary, Department of National Defence, Ottawa.

I, the undersigned, have examined ..... C. Upton .....

candidate for entry as .....

and I believe him to be in all respects fit for His Majesty's Service. He has signed the Certificate given below in my presence.

Dated at ..... Quebec ..... the ..... 18th ..... of ..... March ..... 1940

..... Alex Patterson M.D.
*Examining Medical Officer*

(*Rank*) ..... Surg. Lieut. R.C.N.R.

This examination has been made in accordance with the Instructions for Recruiting.

| (a) Age { Years / Months | (b) Weight without Clothes | (c) Height with Bare Feet | (d) General Development | (e) Chest Girth | (f) Vision by— (i) Snellen's Types (ii) Colour Vision | (g) Vaccinated or re-vaccinated for Small Pox (Date) | (h) Lungs, Heart, etc. | (i) Abdomen, Hernia, etc. | (k) Limbs and Joints | (l) Skin | (m) Ears and Hearing | (n) Testes, Varicocele, etc. | (o) Mouth, Teeth (*No. deficient and No. defective, if any*), Nose, Tonsils, etc. | (p) Anus, Hæmorrhoids, etc. |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 18.1 | lbs. 140 | ft. ins. 5.11 3/4. | Good. | inches (a) maximum 36 (b) minimum 32 (c) mean 34 | right eye 6/6 left eye 6/6 colour vision Ishihara Test working. | Normal. | Normal | Normal | Normal | Normal. | Normal. | Normal. | Normal. | Normal |

## CERTIFICATE TO BE SIGNED BY THE CANDIDATE

I hereby certify that to the best of my belief I have never suffered from Fits, **Incontinence of Urine*, Discharge from the Ears, or any other disease likely to render me unfit for His Majesty's Service. I am willing to undergo, after entry, such dental treatment as may be authorized.

..... Charles A. Upton
*Signature of Candidate*

*When a Candidate is passed, notwithstanding a slight defect or disability, the following Certificate is to be filled up*

This Candidate is ~~the subject of~~ Fit .....

.....

not considered of ~~sufficient importance~~ to cause his rejection, he being desirable in other respects.

..... Alex Patterson M.D.
*Examining Medical Officer*

(*Rank*) ..... Surg. Lieut. R.C.N.R.

* The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.

ID

# DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

## STATEMENT OF WAR SERVICE GRATUITY

4
NAVY

DECEASED MEMBER'S NAME: Charles Michael Augustine (CHRISTIAN NAMES) UPTON (SURNAME) (20)

REGISTER NO. 10331
FILE NO. NSV-3475
DATE 18 Oct/45
SERVICE NO. V-3475
FINAL RANK OR RATING Coder
DATE OF DISCHARGE 10 Feb/42

PAYEE Director of Estates, for service Estate of C.M.A. Upton, NSV-3475
ADDRESS 308 Sparks St., Ottawa, Ont.

DATE OF TERMINATION OF OVERSEAS SERVICE 10 Feb/42

| | | $ | ¢ |
|---|---|---|---|
| A. TOTAL QUALIFYING SERVICE | NO. OF DAYS 692/30 EQUAL TO 23 COMPLETE PERIODS AT $7.50 | 172.50 | |
| B. QUALIFYING OVERSEAS SERVICE | NO. OF DAYS 229 LESS 2 INELIGIBLE DAYS, EQUAL TO 227 DAYS @ 25c. PER DAY | 56.75 | |
| C. SUPPLEMENT FOR OVERSEAS SERVICE | | | |
| | DAILY RATES AT DISCHARGE | | |
| | PAY $2.00 | | |
| | SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $1.45 | | |
| | ADDITIONAL PAY H.L.M. $ .25 | | |
| | $ | | |
| | $ | | |
| | $ | | |
| | DEPENDENTS' ALLOWANCE 1/30 OF $ NIL $ | | |
| | TOTAL $3.70 ×7 = $ 25.90 | | |
| | NO. OF DAYS 229/183 ×$ 25.90 | 32.41 | |
| D. WAR SERVICE GRATUITY | | 261.66 | |
| E. DEDUCTIONS | OVERPAYMENT OF PAY AND ALLOWANCES $ | | |
| | DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ | | |
| | OTHER DEDUCTIONS $ NIL | | |
| F. TOTAL AMOUNT PAYABLE | | 261.66 | |

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $_____ OF $_____ =$ 261.66
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

Voucher 3068 - Oct. 27/45

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

| PREPARED BY | CHECKED BY |
|---|---|
| W | ✓ |

TREASURY

| CHECKED BY | DATE |
|---|---|
| [illegible] | 2/10/45 |

SERVICE REPRESENTATIVE

for Dir. Naval Pay. Accting.

△T

IN REPLY PLEASE QUOTE

No. N.S. 113-U-8

CANADA

# Department of National Defence
## Naval Service
### Ottawa, Canada.

NATIONAL DEFENCE
FEB 25 1942
No 113-U-8
A
34412

February 23, 1942.

Sir:

In accordance with Naval Order No. 839, it is notified for your information that the following casualty in the Naval Forces of Canada has been reported:

| NAME, RANK/RATING NO. | PLACE, DATE & CAUSE of DEATH | NEXT OF KIN |
|---|---|---|
| UPTON, Charles Michael Augustine, Ord. Coder, O.N. V-3475, Royal Canadian Naval Volunteer Reserve. | High Seas, 10th February, 1942. Missing, presumed lost on Active Service. He was serving in H.M.C.S. "SPIKENARD" which was torpedoed and sunk. | Father: Mr. W.F. Upton, 4 Dessane Avenue, QUEBEC, Quebec. |

| ALLOTMENTS IN FORCE IN FAVOUR OF | AMOUNT |
|---|---|
| Mrs. Margaret Upton, 4 Dessane Ave., Quebec, P.Q. (Mother) | $ 10.00 |
| Manufacturers Life Ins.Co., St. Peter St., Quebec, P.Q. | 2.00 |
| Bond Clothes Shop, Barrington St., Halifax, N.S. | 5.00 |
| Receiver General Canada, War Savings Certificates, Ottawa. | 4.00 |

WILL: No record.

Yours truly,

ESTATES BRANCH
FEB 26 1942
H.Q.
OTTAWA.
NATIONAL DEFENCE

R ... ...

SECRETARY, NAVAL BOARD.

Administrator of Estates,
Estates Branch,
Department of National Defence,
OTTAWA.

H.Q. 1010A
250M—5-41 (335)
N.S. 815-7-1010

File: N.S. 113-U-6

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

Ottawa, Canada,

23rd February, 1942,
(Date)

19

Sir:

The following casualty has been reported -

| NAME | RANK or RATING | NAVAL NO. |
|---|---|---|
| UPTON, Charles Michael Augustine, | Ord. Coder, | V-3475, R.C.N.V.R. |

DATE OF ENLISTMENT - 8th March, 1940, (Active Service 20th March, 1940)

DATE OF DISCHARGE - 10th February, 1942.

HOSPITAL - _____
(If discharged in hospital under jurisdiction of D.P. & N.H.)

SERVICE - Canada & the High Seas.
(Indicate whether in Canada only; or in Canada and on high seas or elsewhere).

Reason for discharge and - when and where any disability was incurred, or where death occurred. Missing, presumed lost on Active Service.

He was serving in H.M.C.S. "SPIKENARD"

which was torpedoed and sunk by enemy action on the 10th February, 1942.

(Show clearly whether death or disability due to enemy action, accident or disease, and whether it occurred in Canada, or on the high seas or elsewhere outside Canada).

NEXT OF KIN & RELATIONSHIP -

RELATIONSHIP Father, NAME Mr. W.F. Upton,

ADDRESS 4 Desbane Avenue, QUEBEC, Quebec.

NOTE: If records indicate that rating was separated from his wife, legally or otherwise, details to be furnished and copy of any Court Order, the Separation Agreement, etc., to be furnished.

OFFICER'S OR RATING'S MONTHLY PAY ALLOTTED TO WIFE AND/ OR DEPENDENT -

$ $ 10.00 PAID TO Mother - Still in force

MARRIAGE ALLOWANCE AT $ - Nil - PER DIEM PAID TO - - Nil -

DEPENDENTS ALLOWANCE AT $ - Nil - PAID TO - Nil -

TOTAL MONTHLY PAYMENT TO - WIFE $ - Nil -

Computed by
Checked by DEPENDENTS $ 10.00

R Whittington
SECRETARY,
NAVAL BOARD.

The Secretary,
The Canadian Pension Commission.

(See reverse side for further instructions.) (2a)

LA:FMW

N.S. 113-B-1035.
113-U-8.

February 19, 1942.

AIR MAIL

20

Memorandum:

With reference to Naval Service Headquarter's Memorandum N.S. 30-17-1 of the 5th November, 1941, you are informed with regret (~~casualty has~~ ) that the following (casualties have) been reported to the Next-of-kin in your area:

| NAME | RANK/RATING & OFFICIAL NO. | NAME & ADDRESS OF NEXT-OF-KIN |
|---|---|---|
| BLOUIN, Joseph Arthur Ivan | Able Seaman, V-3582, R.C.N.V.R. | Father: Mr. Joseph Blouin, St. Jean, Isle D'Orleans, P.Q. |
| UPTON, Charles Michael Augustine | Ordinary Coder, V-3475, R.C.N.V.R. | Father: Mr. W.F. Upton, 4 Dessane Avenue, Quebec, P.Q. |

Cause of Death: Loss of H.M.C.S. "SPIKENARD" on 10 February, 1942.

By Order,

SECRETARY, NAVAL BOARD.

The Commanding Officer,
H.M.C.S. "MONTCALM",
30 Laurier Avenue,
QUEBEC, P.Q.

**MEMORANDUM FOR** 

Mr. W.F. Upton,
4 Dessane Avenue,
Quebec City, P.Q.

Any further communication on this subject should be addressed to:—

THE ADMINISTRATOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:—

H.Q. 113-U-8 FD.387

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**DEPARTMENT OF NATIONAL DEFENCE**
**OTTAWA, ONT.**

March 11, 1942

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

UPTON, Charles Michael Augustine, Ord.Coder,

No. V-3475, H.M.C.S. "Spikenard" R.C.N.V.R.

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

(H.R. Wade) Lieut.Cdr.,
for (L.M. Firth) Major,
Administrator of Estates.

ESTATES BRANCH
MAR 20 1942
H.Q.
OTTAWA.
NATIONAL DEFENCE

M.F.W. 77
5M—9-41 (1669)
H.Q. 1772-39-972

## ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below.

| Degrees of Relationship | RELATIVES required to be accounted for | | INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree inquired for | Age | ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative |
|---|---|---|---|---|---|
| 1 | Widow of the Deceased..... | | Nil | | |
| 2 | Children of the Deceased and dates of their Births..... | | nil | | |
| 3 | Father of the Deceased..... | | William Felix Upton | 49 | 4 Dessane Ave. Quebec. |
| 4 | Mother of the Deceased..... | | Margaret Mary Upton | 50 | " " |
| 5 | Brothers of the Deceased | Full Blood | George William<br>Brian Felix<br>Frank Lynn | 24<br>15<br>17 | Overseas with C.A.<br>4 Dessane Ave. Quebec<br>" " |
| | | Half Blood | | | |
| 6 | Sisters of the Deceased | Full Blood | Sheila Ethel Elizabeth<br>Barbara<br>Althea Mary | 22<br>12<br>8 | 4 Dessane Ave. Quebec<br>"<br>" |
| | | Half Blood | | | |
| 7 | Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each. | | Names and ages of their children (if any) | | Address of their children |
| | Nil | | Nil | | |

## ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

| ' | — | NAMES OF THOSE LIVING | Age | ADDRESS IN FULL |
|---|---|---|---|---|
| 8 | Grand-Parents of the Deceased.... | | | |
| 9 | Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage)..... | | Age | |

## FULL PARTICULARS AS TO IDENTITY

| | | |
|---|---|---|
| 10 | What is the full name of the deceased? | Charles Michael Augustine |
| 11 | Give the month and year of his birth. | February, 1922 |
| 12 | Where and when were his parents married? | 1917 at Sillery. P.Q. |
| 13 | If deceased was married, state place and date of marriage. | |
| 14 | Did he leave a Will? If so, a copy should be attached hereto. | Not to my knowledge |
| 15 | Did he leave a bank account? If so, give full particulars. | No. |
| 16 | Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate? | No. |
| 17 | State *your own* postal address in full. | 4 Dessane Avenue. Quebec.P.Q. |

## PARTICULARS OF DOMICILE

| | | |
|---|---|---|
| 18 | Where was deceased born? | Quebec.P.Q. |
| 19 | State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last. | Quebec all his life except for several months in Saint John. as a child. |
| 20 | What was the nature of his employment? | Coder in the Navy |
| 21 | Did he own the premises in which he lived? If so, where? | No. |
| 22 | Did he ever state verbally, or in writing, where he intended to make his permanent home? | No. |

## OTHER PARTICULARS

| | | |
|---|---|---|
| 23 | Did the deceased after enlistment incur any debts for:—<br>*(a)* His own separate board and lodging while on service.<br>*(b)* Service clothing and equipment.<br>An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars. | No. |
| 24 | Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom. | No. |

(NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)

(PLEASE TURN OVER)

## DECLARATION

*Insert degree of relationship for example, "Widow," "Father," "Brother," etc

I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for; and that I am the

*Father of the deceased.

**N.B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public.**

William F Upton
Signature of Informant

## CERTIFICATE

I hereby certify that, to the best of my knowledge and belief William F Upton

*See above ... {Name of Informant} is the *Father of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

Dated at Halifax this 17 day of March 19 42

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public ... H A Story

Qualification ... A Justice of the Peace in and for the County of Halifax, Province of Nova Scotia.

Address ...

**NOTE.—Before granting the above Certificate, care should be taken to see that the Informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative enquired after is stated in its proper place in the Statement opposite.**

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

STATEMENT

430-434 BARRINGTON STREET
HALIFAX, N. S., MARCH 26 19 42

CHARLES MICHAEL UPTON V3475

IN ACCOUNT WITH

# BOND CLOTHES SHOP

NAVAL, MILITARY and AIR FORCE
OUTFITTERS

TELEPHONE: B-8584

| DATE | ITEM | DEBIT | CREDIT | BALANCE |
|---|---|---|---|---|
| Jan 31 | broadfall, jumper | 13.75 | 3.00 | 10.75 |
| Feb 27 | belt | 1.25 | | 12.00 |
| Mar 1 | Coat | 14.50 | | 26.50 |
| February | allotment | | 5.00 | 21.50 |
| Apr 5 | silk, lanyard | .80 | | 22.30 |
| March | allotment | | 5.00 | 17.30 |
| May 3 | 2 pr. socks | 1.00 | | 18.30 |
| " 10 | broadfall, jumper | 13.75 | | 32.05 |
| April | allotment | | 5.00 | 27.05 |
| May 30 | 2 lanyards | .30 | | 27.35 |
| June 14 | shoes, badge | 6.75 | | 34.10 |
| May | allotment | | 5.00 | 29.10 |
| June | " | | 5.00 | 24.10 |
| Aug. 9 | shirt, shorts | 2.65 | | 26.75 |
| July | allotment | | 5.00 | 21.75 |
| Sept. 13 | sweater, wallet | 4.70 | | 26.45 |
| August | allotment | | 5.00 | 21.45 |
| September | " | | 5.00 | 16.45 |
| October | " | | 5.00 | 11.45 |
| November | " | | 5.00 | 6.45 |
| December | " | | 5.00 | 1.45 |
| January | " | | 5cr3.55 | |
| February | " | | 5cr8.55 | |
| Mar 26 | By cheque to Receiver General | 8.55 | | ---------- |

WARTIME PRICES AND TRADE BOARD BRANCH
MAR 30 1942
H. Q. OTTAWA.
NATIONAL DEFENCE

CREDIT →

## ENDORSEMENTS
### from
### Chiefs of Staff of all three Services

"This is one way in which everyone can help the War Effort. No matter how small the contribution it all adds up to an immense sum and, may I remind you that in helping your country you are also helping yourselves, as you will receive your money back with interest in due course. It's going to be a long hard war, so let's all tighten our belts if necessary and do our damndest and so 'Stop Hitler'."

PERCY W. NELLES,
*Chief of the Naval Staff*

"I commend this form of saving to all ranks of the Canadian Military Forces. By supporting it you are doing both Canada and yourself a good turn."

T. L. ANDERSON,
*Major-General,*
*Chief of General Staff.*

"I heartily commend the purchase of these War Savings Pledges to the Officers, Warrant Officers, Non-Commissioned Officers, and Aircraftmen of the Royal Canadian Air Force.

I feel that in this vital period, when the very existence of the British Empire is being threatened, the members of the R.C.A.F. will be glad of this opportunity to assist in making Canada's War Effort as great as possible."

L. S. BREADNER,
*Air Commodore,*
*Chief of the Air Staff.*

# WAR SAVINGS PLEDGE

NAME OF PURCHASER — PRINT IN BLOCK LETTERS: UPTON C

SURNAME OF REGISTERED HOLDER — PRINT IN BLOCK LETTERS: UPTON

REG'T OR OFFICIAL No. V 3475

CHRISTIAN NAME — Mr. ~~Mrs.~~ ~~Miss~~: CHARLIE

HMCS Stadacona
SHIP, UNIT OR ESTABLISHMENT

Until further notice please deduct the sum of $ 4.00 each month, from any pay and allowances which may be payable to me, for the purchase of War Savings Certificates.

| | | | | | | |
|---|---|---|---|---|---|---|
| It is understood that for each . . . | $4 | $8 | ~~$20~~ | ~~$40~~ | ~~$80~~ | Strike out units not applicable |
| so deducted I will receive one . . . | $5 CERTIFICATE | $10 CERTIFICATE | ~~$25~~ CERTIFICATE | ~~$50~~ CERTIFICATE | ~~$100~~ CERTIFICATE | |

registered in my name or that of anyone else I may designate. Purchases are to be made in each month during which my accumulated savings are sufficient to buy a certificate of any denomination.

Date 22 Feb 1941 Signature Charles Upton

# Information for Purchasers of Canada's War Savings Certificates

**Date of Issue.** War Savings Certificates will be dated the fifteenth of the month in which payment is completed. For example, whenever in any one month your Total Salary Deductions are sufficient to buy your War Savings Certificate, that Certificate will bear the date of the 15th of that month.

**Registration.** Each War Savings Certificate is registered at the Bank of Canada, Ottawa. Registration will be made in one name only. A War Savings Certificate is not transferable and cannot be redeemed other than by its registered owner. Provision has been made for redemption in case of the death of a holder.

Care should be taken to state clearly the name and address in which you desire Certificates registered. Spell out the first or Christian name in full, as well as the surname, and give proper prefix (Mr., Mrs., or Miss).

For example: Correct —BROWN, MR. KENNETH D.
Incorrect—Ken. Brown.

A married woman must furnish her own Christian name (not that of her husband).

For example: Correct —WHITE, MRS. MARGARET F.
Incorrect—Mrs. Henry G. White.

**Purchase Limits.** No person may hold War Savings Certificates in excess of a total maturity value of $500 purchased in any one calendar year. That is to say, you may purchase $500 worth this year, and up to a like amount in each succeeding year.

**Income Tax.** Due to the difficulties of calculation, the small amounts involved and the limit on individual holdings, holders will not be required to report the difference between the purchase price and the redemption value of War Savings Certificates, as income in making returns under the Income War Tax Act.

**Redemption.** War Savings Certificates cannot be called for redemption by the Government prior to their date of maturity. The holder, however, has the option six months after issue date of redeeming his certificates for cash, and after the first year will also be paid interest to the date of redemption in accordance with the table of redemption values shown on each certificate. The Minister of Finance reserves the right to require ninety days' notice in the case of redemption before maturity.

## *To All Members of Canada's Armed Forces:*

re: WAR SAVINGS CERTIFICATES

*Many officers and enlisted men of the Navy, Army and Air Force, have asked that arrangements be made for regular deductions from regular Navy, Army and Air Force pay, to allow them, if they so desire, to invest some part of their pay in War Savings Certificates.*

*What War Savings Certificates are, and how they may be obtained, you will find explained in this folder.*

*Whether any deduction from your pay will be made, and how large it will be, will depend, of course, upon your own wishes.*

*If you are interested in our opinion of War Savings Certificates, we think that there is no better "buy" either for yourself or for Canada.*

J. L. RALSTON
C. G. POWER
ANGUS L. MACDONALD.

*Ottawa, July 17, 1940.*

FORM 21

SEW

# STATEMENT OF ACCOUNT

28

True extract from the ledger of H.M.C.S. "AVALON for "SPIKENARD" " ending 31 March 1942.

List 12-2 No. 71 (Name) UPTON, Charles A. Rank Rating Coder No. V-3475

When entered Former Book Date of appearance 1 Jan Whither discharged D.D. 10 February P.M.

| | $ | c. |
|---|---|---|
| CREDIT from former ~~account~~ Book | 78. | 62 |
| Pay as Coder (Rank Rating) from 1 Jan to 28 Feb ( 59 days at $2.00 a day) | 118. | 00 |
| " G.M.. " 9 Feb ~~xxxxx~~ " 10 Feb ( 2 " .06 " ) | . | 12 |
| " H.L.M. " 1 Jan " 30 Jan ( 30 " .13 " ) | 3. | 90 |
| " H.L.M. " 31 Jan " 1 Feb ( 11 " .25 " ) | 2. | 75 |
| " " " " ( " " " ) | | |
| Kit Upkeep Allowance Month of January | 3. | 34 |
| OTHER CREDITS: Clothing Issued to Survivors S.S. "MOUNT KITHERON" CNR 493 | . | 74 |
| Total credits | 207. | 47 |

DEBT from former account

PAYMENTS:—

| | 1st | 2nd | 3rd | 4th | 5th | | |
|---|---|---|---|---|---|---|---|
| | $ c. | $ c. | $ c. | $ c. | $ c. | | |
| 1st month | 120.00 | | | | | Total | 120.00 |
| 2nd month | | | | | | Total | |
| 3rd month | | | | | | Total | |

| | | |
|---|---|---|
| Allotment 10.00, 5.00, 4.00, 2.00 Charged for Jan and Feb. | 42. | 00 |
| Pension deduction (Officers) charged to of | | |
| Hospital stoppages | | |
| Mulcts | | |
| OTHER CHARGES: | | |
| Total debits | 162. | 00 |
| Balance Cr. o~~xDxxx~~ | 45. | 47 |

noted D.N.A. (by) 22-6-45 W

Ledgers R. [signature]
F. [signature]

(Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above 41

NOT VICTUALLED

| LENT, SICK OR LEAVE | INCLUSIVE DATE FROM | INCLUSIVE DATE TO | No. OF DAYS | SHIP, HOSPITAL, etc., IN WHICH BORNE |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

Date 23 March 1942

G.F. Hirons

Pay. Lieut RCNVR for. ACCOUNTANT OFFICER

C.N.S. 2426
25M—10-40 (7514)
N.S. 815-9-2426

# DISTRIBUTION OF SERVICE ESTATES

DME

Estates Form "P. 4"

NAVY

Name UPTON Charles M.A. No. V 3457
Surname Christian Names

CODER HMCS SPIKENARD 10-2-42
Rank Unit Date of Death

AMOUNT W.S.G. 261.66
L.P.C. $ 50.87

Date 3-12-45

Other Credits 56.63

Total 369.16
Prev.dist. 107.50
This dist. 261.66

| SHARE | RELATIONSHIP | NAME AND ADDRESS | AMOUNT |
|---|---|---|---|
| 7/12 | Father | William F. Upton,<br>1540 Guy St. Apt. 6D,<br>MONTREAL, P.Q.<br><br>(1/4 as next of kin entitled)<br>(1/3 for benefit of 4 minors) | 152.64 |
| 1/4 | Mother | Mrs. Margaret M. Upton,<br>(As above) | 65.42 |
| 1/12 | Sister | Sheila E. E. Upton,<br>(As above) | 21.80 |
| 1/12 | Brother | George W. Upton,<br>(As above)<br><br>(As next of kin entitled) | 21.80 |

P4. TO TREAS.
DEC 18 1945

W8G

AUTHORITY

| H.Q. F.E. No. | VOTE | PRI | H.Q. SUB. | OBJ. | AMOUNT |
|---|---|---|---|---|---|
| 9999 | 831 | 00 | 50 | 000 | $261.66 |

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. Firth) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

40M—8-45 (7876)
H.Q.1772-45-27